

Form CPF M 102: Campaign Finance Report Municipal Form

PECEIVE Office of Campaign and Political Finance

Of Massachuseus		File with: City or Town Clerk or Election Commission
	pr 7, 2015	Ending Date: Oct 16, 2015
Type of Report: (Check one) DWN CLERK'S OFFICE TOWN OF SAUGUS, MASS. 8th day preceding preliminary 8th day preceding election	☐ 30 da	y after election year-end report dissolution
Jeffrey V. Cicolini	Comm	nittee to Elect Jeffrey V. Cicolini
Candidate Full Name (if applicable)	-	Committee Name
Selectman	Julie A	. Cicolini
Office Sought and District	7	Name of Committee Treasurer
27 Beachview Avenue Saugus, MA 01906	27 Bea	achview Ave, Saugus, MA 01906
Residential Address	-	Committee Mailing Address
Telephone Number (optional): 2331978	Telephon	ne Number (optional):
SUMMARY BALAN	CE INFO	PMATION.
	CHI MANA	
Line 1: Ending Balance from previous report		380.12
Line 2: Total receipts this period (page 3, line 1	1)	3,880
Line 3: Subtotal (line 1 plus line 2)		4,260.12
Line 4: Total expenditures this period (page 5, 1	ine 14)	1,461
Line 5: Ending Balance (line 3 minus line 4)		2,799.12
Line 6: Total in-kind contributions this period (page 6)	Ø -
Line 7: Total (all) outstanding liabilities (page 7	")	3,576.3
Line 8: Name of bank(s) used: Eastern		
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the be activity, including all contributions, loans, receipts, expenditures, disbursements, in-kin finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury: Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to to activity, of all persons acting under the authority or on behalf of this committee in activity, of all persons acting under the authority or on behalf during this reporting Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, dispursement	the best of my kn accordance with accordance with accordance with accordance with ing period.	and liabilities for this reporting period and represents the campaign with the requirements of M.G.L. c. 55. (Treasurer's signature) Date: 10 0 0 15 nowledge and belief, a true and complete statement of all campaign finance in the requirements of M.G.L. c. 55. I have not received any contributions, the nowledge and belief, a true and complete statement of all campaign
campaign finance activity of all persons acting under the authority of on behalf of t	his committee in	Paccordance with the requirements of M.G.L. c. 55.

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

report all receipts. Please include your committee name and a page number on each page.)				
Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)	
Oct 5, 2015	Joe Bono 109 Salem St Boston Ma 02113	250	Self Employed	
oct 5, 2015	Barry Calvani 14 Bennevento Circle Peabody, MA 01960	200	Self Employed - retail	
Oct 5, 2015	Rick Griffin 19 A Beachview aVe Saugus, MA 01906	100		
Oct 5, 2015	Barbara Lombard 4 vernon St Nahant MA 01908	500	Retired	
Oct 5, 2015	James McNeil JR 10 Oakridge DR Saugus, MA 01906	100		
Oct 5, 2015	Vincent Piccinni 213 Bradstreet Ave Revere, MA 02151	100		
oct 5, 2015	Dana Rogers 66 mountwood Ave Swampscott MA 01907	100		
oct 5, 2015	William Rogers 4 Nirvana Drive Saugus, MA 01906	100		
Oct 5, 2015	Selectman Candidate Loan - Jeff Cicolini 27 Beachview Ave Saugus MA 01906	780	Prince Pizza, Fundraiser	
oct 5, 2015	Selectman Candidate Loan - Jeff Cicolini 27 Beachview Ave Saugus MA 01906	285	Supplies	
Oct 5, 2015	Selectman Candidate Loan - Jeff Cicolini 27 Beachview Ave Saugus MA 01906	60	Stickers - Sachem Signworks	
Line 9: Total Rece	ipts over \$50 (or listed above)	2,575		
Line 10: Total Rece	sipts \$50 and under* (not listed above)	1,305		
Line 11: TOTAL RECEIPTS IN THE PERIOD			← Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)
Date Received	(alphabetical listing required)	Amount	(for contributions of \$200 or more)
Line 9: Total Receip	ots over \$50 (or listed above)		
Line 10: Total Recei	pts \$50 and under* (not listed above)		
Line 11. TOTAL D	ECEIPTS IN THE PERIOD		Enter on page 1. line 2
			☐ Enter on page 1, line 2 Id include only those receipts not itemized above.

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)					
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount	
Oct 5, 2015	Michaels - supplies(paid by candidate)	Route 1 Saugus	Supplies	285	
oct 5, 2015	Prince Pizza (paid by candidate) Route 1 Saugus, MA 01906	Route 1 Saugus, MA	Fundraiser	780	
oct 5, 2015	Sachem Signworks (PAID by	Essex St Saugus	Stickers	60	
Oct 16, 2015	Sachem Signworks (cuecu #107)	Essex St Saugus	Signs	256	
Oct 3, 2015	SCTS (CHECK #101)	Pierce Memorial Dr.	Ad Cable	75	
Line 12: Total Expenditures over \$50 (or listed above)			1,456		
Line 13: Total Expenditures \$50 and under* (not listed above)			5		
		Line 14: TOTAL EXPENDIT	URES IN THE PERIOD nould include only those expenditure	1,461	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

	To Whom Paid	TE D. EXTENDITORES (C	T	T
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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Amazonino a mandanta di canada da manda di canada d				
		Line 12: Expenditures over \$50	(or listed above)	
Line 13: Expenditures \$50 and under* (not listed above)				
Enter on page 1, line 4 → Line 14: TOTAL EXPENDITURES IN THE PERIOD				
If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
				The second secon	
<u> </u>		Line 15: In-Kind Contributions	over \$50 (or listed above)		
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
Enter on page 1, line $6 \rightarrow$ Line 17: TOTAL IN-KIND CONTRIBUTIONS					

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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